PTO/SE/30 (10-01)

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REQUEST FOR

TINUED EXAMINATION (RCE) RANSMITTAL

Address to: Commissioner for Patents

Box RCE Washington, DC 20231

lection of information unless it displays a valid OMB control number.					
Application Number	09/009,294				
Filing Date	January 20, 1998				
First Named Inventor	Mills				
Art Unit	1745				
Examiner Name	Kalafut				
Attorney Docket Number	62-226-8A2				

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

Submission required under 37 CFR 1.114						
a. \(\times \) Previously submitted i. \(\times \) Consider the amendment(s)/reply under 37 CFR 1.116 ii. \(\times \) Consider the amendment(s) referred to above will be entered). iii. \(\times \) Consider the arguments in the Appeal Brief or Reply Briii. \(\times \) Other b. \(\times \) Enclosed i. \(\times \) Amendment/Reply iii. \(\times \) Affidavit(s)/Declaration(s) iv. \(\times \) Other	previously filed on					
Miscellaneous a. Suspension of action on the above-identified application is a period of months. (Period of suspension shall not exceed b. Other	requested under 37 CFR 1.103(c) for a					
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE a. The Director is hereby authorized to charge the following fee Deposit Account No. 50-0687 i. X RCE fee required under 37 CFR 1.17(e) 08/06/6 ii. Extension of time fee (37 CFR 1.136 and 1.17) 01 FC: iii. Other 02 FC: b. Check in the amount of \$ 1,401 enclosed C. Payment by credit card (Form PTO-2038 enclosed) WARNING: Information on this form may become public be included on this form. Provide credit card information	2002 TGEDAMU1 00000022 09009294 279 370.00 0P 202 42.00 0P 203 9.00 0P 228 980.00 0P					
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED						
Name (Print Type) Jeffery S. Melcher Registration No. (Attorney Agent) 35,950 Date 08/05/02						
CERTIFICATE OF MAILING OR TRANSMISSION						
I hereby certify that this correspondence is being deposited with the United States Poenvelope addressed to: Commissioner For Patents, Box RCE, Washington, DC 2023 Office on the date shown below.	ostal Service with sufficient postage as frst class mail in an 1, or facsimile transmitted to the U.S. Patent and Trademark					
Name (Print/Type)						
Signature	Date					

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patents. Box RCE, Washington, DC 20231.

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ENTE	RE	Y/AMENDMENT E TRANSMITTAL
	MAUL	

AMOUNT ENCLOSED \$1,401 **Examiner Name**

FEE CALCULATION (fees effective 10/01/97)

Filing Date

Group Art Unit

Attorney Docket No. **Application Number**

First Named Inventor

Mills

1745

CLAIMS AS AMENDED	Claims Remaining After Amendment	Highest Number Previously Paid For	Number Extra		Rate	Calculations
TOTAL CLAIMS	300	299	1 ⁽³⁾	Х	\$18.00 =	18.00
INDEPENDENT CLAIMS	18	17	1	Х	\$84.00 =	84.00
Since an Official Action set an <u>original</u> due date of, petition is hereby made for an extension to cover the date this reply is filed for which the requisite fee is enclosed (1 month (\$110); 2 months (\$400); 3 months (\$950); 4 months (\$1,510); 5 months (\$2,060)): 5 months					1,960	
If Statutory Disclaimer under Rule 20(d) is enclosed, add fee (\$110)				+		
Total of above Calculations =				\$2,062		
Reduction by 50% for filing by small entity (37 CFR 1.9, 1.27 & 1.28)			-1,031			
TOTAL FEES DUE =				\$1,031		

(1)	lf entry	(1) is	less tha	n entry ((2), entry	(3) is "0".
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METHOD OF PAYMENT

[X] Check enclosed as payment.

Charge "TOTAL FEES DUE" to the Deposit Account No., below.

AUTHORIZATION

RECEIVED TC 1700 If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit [X] any overpayment or charge any additional fees under 37 CFR 1.16 or 1.17 necessary to maintain pendency of the present application to:

Deposit Account No.:

50-0687

OrderNo.: (Client/Matter)

62-226

SUBMITTED BY: Manelli Denison & Selter, PLLC

Typed Name	Jeffrey S. Melcher	Reg. No.	35,950
Signature	Min	Date	08/05/02

⁽¹⁾ If entry (2) is less than 20, change entry (2) to "20".
(2) If entry (2) is less than 20, change entry (2) to "20".
(4) If entry (4) is less than entry (5), entry (6) is "0".
(5) If entry (5) is less than 3, change entry (5) to "3".